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Patient centricity is a concept, not a reality

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Though the industry quoted data on the actual cost of clinical trials is questionable, it's clear that despite outsourcing to CROs clinical research is too slow and expensive. In cancer specifically, every year multimillions are diagnosed, but only 3-% participate in a clinical trial. For many diseases, a clinical trial could be a patient's best chance and is accompanied by expert care and a full workup.

Patient centricity is a concept, not a reality. Even the FDA state they want trial design to be driven by patients, to make trials less burdensome. Patient diversity is also a priority.

Traditional study design still starts from: "How many patients exist that fit these eligibility criteria?" It's a good starting question, but data that patients exist doesn't mean they are willing to participate in trials, and we know the common reasons and they can be more pronounced in biosimilar trials.

The result of ~3-% being willing to join such trials means trials run slowly.

There are hundreds of apps and database access companies, but what effects are they having? A fresh approach is needed.

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